



EMPLOYEE EXIT CHECKLIST
STATE OF NORTH DAKOTA
SFN 19451 (5-02)

Employee Name	Termination Date
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Instructions: This exit checklist is intended to act as a guide for the appointing authority and employee when an employee's service with an agency is ending. After a particular section has been completed, the person who completed the section should initial and date the form. When the entire checklist is completed, the form may be placed in the employee's personnel file.

	Initials	Date
Employee Responsibility		
Submit letter of resignation and include date of planned termination and future mailing address.		
Agency Responsibility		
Agency must submit proper forms to PERS and new state agency, as applicable (www.discovernd.com/hrms):		
• Retirement Plan		
• Health Insurance		
• Life Insurance Plan		
• Dental Insurance Plan		
• Long Term Care Plan		
• Flex Comp Plan		
• Deferred Compensation Plan		
Agency must submit proper forms to OMB/Payroll, as applicable: Note: If employee is transferring to another state agency, notify the receiving agency of the employee's anniversary month, annual leave accrual rate, family sick leave used since the beginning of year, number of annual and sick leave hours being transferred. (The receiving agency does not have to accept all of the employee's accumulated unused annual leave hours.) Zero out all balances on the system for the terminated employee.		
• Personnel Action Form (PAF)/SFN 13090 lists action taken, last date of employment, and reason for separation.		
• Direct Deposit Employee Authorization/SFN 50428 (continue/stop direct deposit)		
• Supplemental Payroll Form for payment of leave hours.		
• Deduction Worksheet/SFN 14339 (continue/stop deductions)		
• Confirm end-of-the year address for distribution of W-2.		
Obtain keys, ID, credit cards, phone card, uniforms, and other state property in employee's possession.		
Ask employee to update supervisor on status of projects/tasks.		
Complete inventory check of employee's workstation. Determine if computer access codes or passwords need to be changed.		
Complete exit interview. (optional)		
Organize employee's personnel file and retain for six years after last action.		
Other		

Employee Signature

Date

Supervisor Signature

Date